

"Excellent Care – Earned by Veterans – Delivered Here"

Voices of VISN 6

Official news from around your VISN

Vol. 2, No. 10 August 1, 2012

Expanded Outpatient Clinic Serves Fredericksburg

By Richmond VAMC public affairs

McGuire VAMC held the official ribbon-cutting ceremony for the new Fredericksburg Outpatient Clinic July 16. Fredericksburg's Mayor Mary Katherine Greenlaw helped cut the ribbon for the clinic, calling it "a very important service for some very important people."

"Opening this new clinic demonstrates VA's commitment to caring for those who have served while at the same time directly supports Virginia's goal to become 'America's Most Veteran Friendly State,'" said Gus Davila, VISN 6 deputy network director.

"This new facility is double the size of the previous one. From the parking lot, where the spaces are actually larger, to the new floor plan, everything is designed to provide patients a comfortable atmosphere," Davila said.

Additional space means having more exam rooms and staff, which in-turn allows the clinic to take care of more Veterans. A team of about 20 will be able to care for more than 4,500 area Veterans. Davila explained that the original clinic was busting at the seams caring for 2,500 Veterans and since the new clinic became operational in June, it has already enrolled an additional 1,500 Veterans.

This 10,000-square-foot clinic was built by the local firm Wack General Contractors to LEED (Leadership in Energy

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Neil Glover

Deputy Network Director Gus Davila joins Richmond VAMC Director Chuck Sepich, Fredericksburg Mayor Mary Katherine Greenlaw (far right) and other members of the official party to cut the ribbon signifying the opening of the expanded Fredericksburg CBOC July 16.

Fayetteville To Get \$1.7 mil Phone Upgrade

By Robin DeMark Fayetteville VAMC public affairs

Fayetteville VAMC Veterans and staff have more to cheer about as a project to replace the existing telephone switchboard with a new \$1.7 million voice system is slated to kick off this September, ending a three-year wait.

Installation of the private branch exchange system is another critical step toward providing high quality communication systems in support of growth and expansion projects planned for the Fayette-ville VAMC campus, two new health care centers and new community based outpatient clinics.

The PBX installation will encompass voice systems at the Public Works Commission located on Hay Street, the Village Green Annex and the Veteran Center on Ramsey Street.

"We believe this expand-



Robin DeMark

John Syme and Reggie McCrimmon, Fayetteville VAMC information technology and telecommunication specialists, verify power and cabling requirements for the new phone system with Stoney Chance, electrical sub-contractor.

able state-of-the-art voice system will provide Veterans, staff, administration and clinicians servicing our Veterans in the greater Fayetteville community quite well for sometime into

the future," said VA telecommunications specialist Matthew Hammaker, national voice systems project manager for VA

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Inside in Brief

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- Graduates embrace health informatics as vehicle for improved care delivery.
- Hampton Rural Health launches diabetes seminars.
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- NFL Hall of Famer thrills Salem community; Military history for August.
- TRICARE Prime enrollment fee to increase October 1.
- VISN 6 Sites of Care with addresses and phone numbers for each location.

From the Director

July was another busy month for VISN 6. Our new clinics are progressing nicely, working with the unions, we have developed a VISN-wide Alternative Dispute Resolution policy, and we are getting ready for a strategic planning meeting unlike any we've held before.

Before I share an update on the progress of the new clinics, let me tell you that VA has simplified the characterization of our clinics, eliminating the use of the term Multi-Specialty Outpatient Clinic.



The term Community Based Outpatient Clinic (CBOCs) will be used to refer to most and the larger, more complex or multi-specialty clinics will all now be referred to as Health Care Centers or HCCs.

The new Wilmington HCC is moving forward and if all stays on track, we may be moving into that facility in January. The Greenville HCC is also on track and we expect to move to this new facility in the fall of 2013 and while permit problems temporarily slowed the Goldsboro CBOC, we're now moving full speed ahead and expect it to come on line in the spring.

VA has identified sites for the HCCs programmed for Fayetteville, Kernersville and Charlotte. We expect to issue a contract for the Fayetteville facility in September; we are reviewing the final floor plan for the HCC in Kernersville and we expect to advertise the Solicitation for Offer in August. We also expect to advertise the Solicitation for Offer for the HCC in Charlotte in November.

The big news for this month is that Veterans living in or around Sanford will soon no longer need to journey north to Durham or South to Fayetteville to receive VA provided primary care. In early July, VA approved a well-needed CBOC for Lee County. With the approval hot off the press, we are now in the preliminary stages of planning and will broadcast more as the plan comes together. This will likely be our last new brick and mortar facility as we focus more and more on telemedicine to meet future needs.

Moving away from bricks and mortar, I'd like to address some of the ongoing internal efforts we are pursuing to ensure the best possible work environment for the entire VISN 6 team. Recently, we've enjoyed the fruits of the partnership between labor and management. Together, we are committed to finding creative, acceptable, and timely solutions to any and all disputes. Our commitment is demonstrated through the VISN-wide Alternative Dispute Resolution policy which relies on mediation to solve issues at the lowest level. The policy gives all VISN employees access to mediation as an alternative means of resolving disputes and demonstrates a positive approach that focuses on joint ownership of concerns and issues with the intent of resolving disputes quickly and informally. Our mediators can help the parties identify issues, foster joint problem solving, and explore settlement opportunities. Working together, we can maintain our focus on the important business of health care and organizational

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956-5541.

Questions or comments about the newsletter, e-mail Bruce.
Sprecher@va.gov or call 919Jef



Daniel F. Hoffmann, Network Director Augustin Davila, Deputy Network Director Mark Shelhorse M.D., Chief Medical Officer Bruce Sprecher, Director, Public Affairs Steve Wilkins, Network Public Affairs Jeffery Melvin, Network Public Affairs Patrick W. Schuetz, Newsletter Layout wellness. I'm proud to say that this policy was jointly developed through the VISN 6 Labor Management Forum which represents all eight medical centers, the American Federation of Government Employees (AFGE), National Association of Government Employees (NAGE), and National Nurses United (NNU).

Let me close by sharing that the VISN is reinvigorating our strategic planning process to provide a roadmap for our future. In collaboration with our Union partners, we will spend time in late August analyzing our internal strengths and weaknesses, and considering the opportunities and challenges in this current environment. Our intent is to position VISN 6 as a leader in delivering patient-centered care that is personalized, proactive and achieves measurable improvements in the health outcomes of all our Veterans. We intend to build on our past strong performances and flush out where we have opportunities to further improve. We will continue to evolve and refine our policies and practices to meet current and future challenges. Together we will forge a network of care second to none.

Sincerely, Dan Hoffmann



Network Seeks Health Care Providers

The VA Mid-Atlantic Health Care Network is looking for highly qualified health care providers. If you or someone you know is looking for a challenging and rewarding opportunity, please contact Harold "Keith" Liles Jr., Mid-Atlantic Region's National Healthcare Recruitment Consultant, for additional information. Liles can be reached via email at Harold.Liles@va.gov or by phone at 919-408-4741.

Current Vacancies

Psychologist - Salisbury, N.C.

Clinical Psychologist, Psychiatrist, Primary Care Provider - Fayetteville

Pharmacist - Hampton, Va.

Dermatologist, Gastroenterologist, Urologist - Salem, Va.

Psychologist, Gastroenterologist, Pulmonologist - Beckley, W. Va.



In Wheelchair Games Aftermath: Stats, Stories, Spirit

By Steve Wilkins VISN 6 public affairs

Thousands flocked to Richmond the week of June 24, committed to one goal: to volunteer for the 32nd National Veterans Wheelchair Games. Motivated by reasons as varied as the people themselves, for months they'd set their hearts on getting to Richmond to help make the annual Games a success

Athletes rolled through the hallways of Richmond International Airport to a dramatic welcome featuring cheering squads who'd come to greet them, along with volunteers with banners, set to escort them through the registration process and on to shuttles to their hotels.

Now, in the weeks following the Games, is when numbers are crunched, and discussions go on about what worked and how to improve processes and systems. The final tabulations will reflect that more than 500 athletes earned 148 gold, bronze and silver medals.

Something new took place in tracking medal counts this year, too. Tallies were kept and reported per VISN. At first, the athletes didn't notice, then as they began to learn what a VISN was, and how their contribution affected their "team count," they began to watch the tote boards more closely.

VISN 6 participants took home a large share of the medals, with 63 Gold, 41 Silver and 25 Bronze (exceeded only by VISN12, the Great Lakes Health Care System,).

Curiously, none of that mattered when chairs clashed and metal scraped during quad rugby, one of the Games' 17 medal events. Volunteers and coaches didn't think about it when they spurred athletes to new personal heights in the slalom, or they picked up a fallen athlete who'd tumbled during a basketball game. It didn't matter to the athletes with blistered hands as they strained to make their arms and wheels go faster in the track events. What did matter was that they were all there.

As the story of the Games

developed, what mattered to volunteers was that they helped someone realize a goal. might have been the lifeguards in the swimming pool, who were able to help a distressed athlete right himself and finish. For the athlete it was the joy in achieving the goal and the satisfaction of extending maximum effort. Several times in the pool, the greatest applause was for the last place finisher, not the first. The numbers aren't the memories etched in athletes' heads.

What will stay with them are the moments they spent toughing out their competition, conversations with volunteers and among fellow athletes, sharing tips and nostalgic stories; or recalling what may have just happened on a field of play. It may even be the wheelchair repair station that saved them from elimination, or the motorized wheelchair that pushed a manual chair along the thick convention center carpet, or up the hill to the hotel.

For the record, there are some significant numbers that VISN 6, especially Richmond VAMC, staff can be proud of. The first National Veterans Wheelchair Games, held at Richmond VAMC in 1981, involved 74 Veterans from 14 states. This year's Games offered competition in 17 events, and included more than 3,000 volunteers who served 540 athletes and 90 coaches. In 2012, athletes traveled from 48 states, Puerto Rico, Guam and Great Britain to attend the event.

The numbers from this year's event will travel to the next location, Tampa, Fla., along with equipment, reports, instructions and advice. What won't, and what is the element that the staff there will work hard to recreate for the athletes is the sense of spirit and the feeling of achievement that it will take all of them and each of their volunteers to generate. The funny thing is that they won't need to work to create that atmosphere. It will come naturally. People will want it to be so, and it will. The Games will go on and all will be well. Remember that Tampa, and have fun with it!



Mark Cowan

Countdown To 33rd Veterans Wheelchair Games Begins
The Games 'torch' is passed to Tampa VA Hospital Director Kathleen Fogarty and Florida Gulf Coast PVA Chapter
President-Elect Davis Celestine, signaling the official start of
planning for the 33rd National Veterans Wheelchair Games,
the largest annual wheelchair sports event in the world. The
Games will be held in Tampa July 13 to 18, 2013 and are expected to draw more than 500 Veterans from across the United
States, Puerto Rico and Great Britain. With the theme "Seize
the Day in Tampa Bay," the 33rd Games will be hosted by the
James A. Haley Veterans Hospital along with the PVA's Florida Gulf Coast Chapter. This is only the second time the Games
have been held in Florida; Miami hosted the event in 1991.

SERVING THOSE WHO SERVE: Understanding the Behavioral and Mental Health Issues of Veterans, Service members and Their Families

Monday, Aug. 13, 2012 9 a.m. - 1:15 p.m. 5039 Airport Center Parkway, Building K Just off I-85 less than 5 minutes From Airport

More than two million U.S. service men and women have been deployed to Iraq and Afghanistan since September 11, 2001, according to the "Strengthening Our Military Families" report issued by the White House last year. Of those, 55% are married, 40% have two children, and 63% live in over 4,000 communities nationwide. The goal of this program is to bring general awareness to the behavioral, mental health, and family dynamic issues that surround veterans, service members and their families.

Speakers: Active Duty and Reserve Service Members, TRICARE Representatives, and Harold Kudler, MD (Durham VA Medical Center) This program is partially funded with grants from HRSA/ Department of Health & Human Services for AHEC Training and Consultation Centers (A-TrACC) and the NC Area Health Education Programs, in conjunction with the Citizen Soldier Support Program (CSSP).

"This training is a part of the nationwide AHEC Veterans Mental Health Project."

Credit: .40 CEUs / 4.0 Contact Hours

For more information or to register, please visit www.charlotteahec.org. Contact: Lisa Littlejohn, Education Specialist at 704.512.6243





EXCELLENT SERVICE

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VA Mid-Atlantic Health Care Network VISN 6

Graduates Embrace Health Informatics As Vehicle For Improved Care Delivery

By Jeff Melvin VISN 6 public affairs

Twenty-seven people in VISN 6 were among the 730 staff VA-wide to successfully complete an eight-week online VA Health Informatics Training Program offered to VA staff through Bellevue College in Washington State.

The graduates devoted more than 60 hours of their time outside of work to complete the program, said Diane Bedecarré. the Health Informatics Workforce Development Co-Lead. "Health informatics," Bedecarré said, "is an emerging discipline at the intersection of computer science, information science and healthcare. With the increased use of information technology in healthcare the VA needs to ensure its workforce is capable of developing, implementing and supporting health information technology that improves care delivery to our Veterans."

Health informatics includes a number of subareas such as clinical informatics, nursing informatics, pharmacy informatics, medical informatics, health information management and health information technology. The varying types of informatics focus on a particular set of needs inside the larger structure of health care. For example, pharmacy informatics focuses on improving safety and efficiency of medication management by coordinating prescription orders against insurance databases and patient records, as well as secure electronic prescription transmission.

Bedecarré, a registered

nurse, said the training program provided an overview of the use of health information technology (HIT), how HIT can improve care delivery, how HIT can be designed with the user in mind and the various standards that enable information exchange.

She said students participating in the program came from various parts of the organization and in various roles such as nurses, physicians, pharmacists, data analysts, medical records staff, application coordinators, and information technology staff.

The program was well received by students. "Comments from students such as, 'This was the best training program I ever participated in' and 'I am able to use the information in my job today' were not uncommon," Bedecarré said. "That mixture of staff from various roles led to rich and lively online discussions in the interactive learning environment. This training program will serve as a model for future HIT training offered to VA staff. Discussions are in process with Bellevue College to extend the VA health informatics course to Department of Defense colleagues. Stav Tuned!"

Monica Miller, pharmacy informatics program manager at the Hampton VAMC, was one the VISN 6 students. Noting that Hampton has been selected as one of two pilot sites for the integrated electronic health record, she said she hopes to apply what she learned from the course to Hampton's movement to the iEHR.

"Providers, nursing, pharmacy, IT, admin staff-we are all

part of the informatics team and all need to feel we have input when a new system is implemented," Miller said. "I hope to use what I learned from the course as the Hampton VA prepares for the pilot of the iEHR."

Salisbury VAMC Community Health Nurse Coordinator Jacenta Best is another of the VISN 6 students. Planning to pursue a graduate degree in nursing, she took the course because she wanted to know if informatics was an area she would want to work in.

Best related how she plans to use some of the knowledge she gained to help get the Salisbury community health staff up to speed on mobile electronic documentation for community visits in contract nursing homes and adult day care centers, a practice used at the Madison (Wis.) VAMC, where she worked prior to her recent transfer.

"It was a national initiative; however, it is not being used here in community health and I would like to make this a goal for our department," Best said. "Implementation of mobile electronic documentation would allow practitioners to document in real time, streamline visits, be able to view a Veterans medication list, upcoming appointment and review past clinic appointments and problem list. This provides more timely answers to Veterans and caregivers and eliminates phone tag, faxing, and delays in responses."

Health informatics can potentially provide a number of benefits. Electronic records can speed up admission and treatment times for patients, saving



Luke Thompson Jacenta Best, community health nurse coordinator, Salisbury VAMC, is one of 27 VISN 6 staff to successfully complete an eight-week online VA Health Informatics Training Program.

time for the patients and health care professionals. Informatics can also reduce the duplication of tests, saving money and potentially reducing health care costs. Similarly, electronic data and orders can be read more easily, reducing the guesswork that can accompany handwritten records and improving accuracy in health care.

A study by the Center for Information Technology Leadership covering a 10-year period between 1997 and 2007 found that VA's health IT investment saved the organization \$3 billion during the period. Titled "The Value from Investments in Health Information Technology at the U.S. Department of Veterans Affairs," the study by Charlestown, Mass. researchers was first published in the April 2010 edition of "Health Affairs." The authors noted that most of the savings were in areas that also improved quality, safety and patient satisfaction.

VISN 6 VA Health Informatics Training Program Graduates

Deborah Nave, Asheville VAMC Stephen Feren, Asheville VAMC Kathy Miller, Asheville VAMC Kelly Radford, VHA Asheville, OI&T Julia Williams, Beckley VAMC Tomi Lilly, Beckley VAMC Stephanie Moscarito, Beckley VAMC Paul Morehead, Beckley VAMC Laura Herbert, Durham VAMC Sally Kellum, Durham VAMC Evelyn Reyes-Harvey, Durham VAMC Trudy Shanewise, Durham VAMC Lana Nichols, Fayetteville VAMC Jeannie Jernigan, Fayetteville OI&T Leeann Gadbaw, Fayetteville VAMC Sharon Durio, Hampton VAMC Monica Miller, Hampton VAMC Barbara Freeby, Richmond VAMC Rhonda Barnes-Bell, Richmond VAMC Aarona Brooks, Richmond VAMC Lorrie Swartley, Richmond VAMC Pamela Johnson, Richmond VAMC Elizabeth Crockett, Salem VAMC Jennifer Noell, Salem VAMC Glyne Conner, Salem VAMC Rebecca Moore, Salem VAMC Jacenta Best, Salisbury VAMC



Hampton's Rural Health Launches Diabetes Seminars

By James Coty Hampton VAMC Public Affairs

Maintaining good health can be a struggle for many Veterans, but it can be even more so in rural locations where preventative health care can be more challenging to find. One of the missions of the Hampton VAMC's Rural Health Initiative team is to reach out to these areas and provide health care education to Veterans in rural northeastern North Carolina and southeastern Virginia.

"We know that if we can engage Veterans and encourage them to talk about health care, we can help them," said Debra Frondelli, Hampton VAMC nurse educator. "As part of the RHI team, it's my job to teach Veterans about ways to self-manage their health care."

Frondelli is one of two nurse educators who travel to the rural areas that are part of Hampton's catchment area to educate Veterans about diabetes and ways to manage their condition as part of the diabetes self-management program.

"We want to empower Vet-



Debra Frondelli

Veterans gather at the American Legion Post in Mathews, VA for a diabetes seminar.

erans to make changes necessary to manage their diabetes," said Frondelli. "We have partnered with American Legions and VFWs throughout the area to help us promote the program among their members."

Through the DSME outreach program, the RHI team has touched the lives of more than 120 Veterans and 20 family members.

As part of the program, the nurse educators conduct a series of one-hour classes designed to help Veterans learn how to manage their condition. The classes are held once a month for six months and include topics such as Healthy Eating, Be-

ing Active, Blood Sugar/Taking Medications, Problem Solving and Healthy Coping. The nurses also help Veterans track their blood pressure, estimated average glucose (A1C) and weight management.

According to Frondelli, Veterans who participated in past events had varying degrees of success in reducing their weight and lowering their blood pressure and A1C. She added many Veterans reported feeling much better with even minor changes in habits.

According to the American Diabetic Association, rates in diabetes cases are 17 percent higher in rural areas than in urban communities. Access to health care remains a significant issue in rural areas.

The RHI team educates Veterans with diabetes that they make decisions daily regarding self-care that can impact short and long-term clinical outcomes. Behavioral changes are crucial to the management of diabetes. They spread the word that without adequate knowledge and support, successful change is unlikely.

Outreach, Rural Health Teams To Visit Local Communities

Veterans in the Fredericksburg, Va., Leland and White-ville N.C. communities can enroll in the VA health care system, receive health information, and find out about various services available to them through the Veterans Health Administration when representatives of the Richmond and Fayetteville VA Medical Centers conduct outreach events in August.

The Richmond VAMC Community Outreach Team will visit Fredericksburg Aug. 8. The event will be held at VFW Post 3101, 2701 Princess Ann Street, Fredericksburg, Va. 22401. The event will be held from 9 a.m. to 2 p.m.

The Fayetteville VAMC Rural Health Team will visit Leland Aug. 10 and Whiteville Aug. 15. The Leland event will be held at VFW Post 9408, 1211 Village Road, Leland, N.C. 28451. The Whiteville event will be held at the American Legion Post 233, 313 West Phillip Street, Whiteville, NC 28472. Both events run from 10 a.m. to 2 p.m.

Representatives will be available to discuss resources available to Veterans. Eligibility and enrollment specialists will be on-hand to discuss VA health benefits and accept Veterans' enrollments on site. Information on issues such as mental health, women's health services, diabetes management and controlling hypertension and cholesterol levels will also be available.

Anyone who served in the U.S. military is invited to attend the events. Veterans are highly encouraged to bring a copy of their DD 214 (discharge paperwork) and last year's financial information to expedite enrollment in the system.

For more information about the Fredericksburg event, contact Ms. Sharon Rhone at 804-675-5000 ext. 3382 or email her at sharon.rhone@va.gov.

For more information about the Leland event, contact the Fayetteville VAMC Public Affairs Officer Robin DeMark, at 910-488-2120, ext. 5991 or the County Veteran Service Officer Anita Hartsell at 910-253-2233.

For more information about the Whiteville event, contact DeMark, or the County Veteran Service Officer Sherry Blackman at 910-640-6638 or the AL Post Commander Rasheed Rahman at 910-212-2532.

Fredericksburg continued from Pg 1

and Environmental Design) Silver standards. LEED certification denotes that the building was built using strategies aimed at achieving high performance in key areas of water savings, energy efficiency, and indoor environmental quality.

According to Davila, VA is not only better able to care for more Veterans, but doing so with increased care for the environment as well.

Vietnam Veteran George Firehammer attended the ribbon-cutting ceremony. "Leadership for the outpatient clinic came up and thanked us," Fire-hammer said. "It shows they have our best interests at heart. I think the clinic represents VA's intent to provide care for more Veterans."

Angelo Laviano, a spry

82-year-old Veteran said he has been a patient at the Fredericksburg clinic for 10 years and is looking forward to his first appointment at the new-clinic. "They take good care of us," he said. "It's why I look so young."



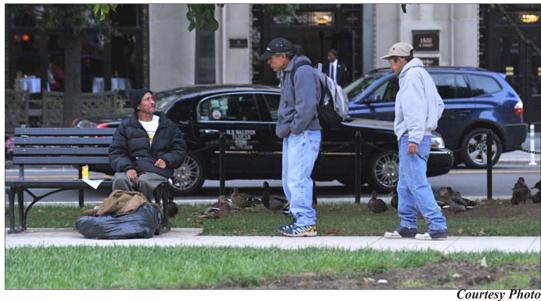
VA Announces Grants To Help End Veteran Homelessness

Four organizations in the VISN 6 region – three in North Carolina and one in Virginia – are among the 151 community agencies in 49 states, the District of Columbia and Puerto Rico, to benefit from \$100 million in grants announced July 17 by Secretary of Veterans Affairs Eric K. Shinseki. The grants will help approximately 42,000 homeless and at-risk Veterans and their families as part of the Supportive Services for Veteran Families program.

"We are committed to ending Veteran homelessness in America," said Shinseki. "These grants will help VA and community organizations reach out and prevent at-risk Veterans from losing their homes."

Under the program, the four agencies received nearly \$1.7 million. Asheville Buncombe Community Christian Ministry, Inc. in Asheville received \$360,000; Passage Home Inc., in Raleigh received \$153,437; United Way of Forsyth County, Inc. in Winston Salem received \$560,085 and Virginia Supportive Housing in Richmond received \$671,812.

Únder the Supportive Services for Veteran Families program, VA is awarding grants to private non-profit organizations and consumer cooperatives that provide services to very low-income Veteran families living in – or transitioning to – permanent housing. Those community organizations provide a



VA's partnership with HUD, as well as key community partners, has helped reduce Veteran homelessness by 12 percent.

range of services that promote housing stability among eligible very low income Veteran families.

Under the grants, homeless providers will offer Veterans and their family members outreach, case management, assistance in obtaining VA benefits and assistance in getting other public benefits.

Community-based groups can offer temporary financial assistance on behalf of Veterans for rent payments, utility payments, security deposits and moving costs.

VA estimates these grants will serve approximately

42,000 homeless and at-risk Veteran families nationwide. This is the program's second year. Last year, VA provided about \$60 million to assist 22,000 Veterans and family members.

In 2009, President Obama and Secretary Shinseki announced the federal government's goal to end Veteran homelessness by 2015. The grants are intended to help accomplish that goal. According to the 2011 Annual Homelessness Assessment Report to Congress, homelessness among Veterans has declined 12 percent since January 2010.

Through the homeless Veterans initiative, VA committed \$800 million in FY 2011 to strengthen programs that prevent and end homelessness among Veterans. VA provides a range of services to homeless Veterans, including health care, housing, job training, and education.

More information about VA's homeless programs is available on the Internet at www.va.gov/homeless, or by calling 877-424-3838.

Details about the Supportive Services for Veteran Families program are online at www.va.gov/homeless/ssvf.asp.

Fayetteville continued from Pg 1

Central Office.

Hammaker added that the new NEC SV8500 and SV8300 voice systems will provide new functionality to greatly improve medical care response time for patient service delivery and improve staff efficiency.

For the medical and support staff, new user phone features like ease of operation, voicemail, auto attendant, automated call distribution and better support will be added locally and available in all other clinic locations.

The system will also add unique capabilities for the information technology managers.

According Marine to Corps Veteran John Syme, Fayetteville VAMC telecom manager, facility systems managers can look forward to new call accounting tools to provide management with call statistics, monitoring and traffic analysis as well as power failure recovery when needed during an emergency. The PBX, using Voice over Internet Protocol capabilities, will communicate through existing data circuits and bypass publically switched phone systems that will provide significant cost savings.

"The new phone system

provides us the up-to-date tools necessary to bridge the communications gap with our Veterans," said Syme. "It still relies on a robust and adequate workforce to field the calls and address the needs of our Veterans."

The PBX installation is being contracted with Standard Communications, Inc. a Virginia-based service disabled, veteran-owned small business. They are currently supporting more than 100,000 telephones at 220 VA locations and several other Federal agencies across the country.

"I was delighted to see the

level of commitment from the Favetteville VAMC staff at the kickoff meeting," said company president and Navy Veteran, John Moliere. "Elizabeth Goolsby (Fayetteville VAMC Director) and her senior staff understood this project affects each and every member of the administration and clinical staff and she promised to make this project successful. We look forward to working with the Fayetteville folks to make this the most successful installation and cutover we ever undertook."

The new phone system is expected to be installed by March 2013.





VISN 6 Learning Consultant Brings Graphic Recording Skills

By Katherine McMullin VISN 6 health systems specialist

VISN 6 is fortunate to have among its talented employees Learning Consultant Carol Vollmer, who is trained in the skill of graphic recording.

Graphic recording, also called visual facilitation, is a method of capturing in real time the essence of a group discussion using colors, words, and images. The colors, words, and images are recorded on large, 4-feet by 8-feet, sheets of paper.

The goal of the graphic recorder, Vollmer said, is not to interpret the discussion, but to record it visually, as faithfully as possible.

"Graphic recording tends to encourage more group participation because everyone can see that their thoughts and contributions are being captured," said Vollmer. "Participants can look at the graphic recording and see how parts of the discussion relate, interact, and what is missing. This documentation becomes part of the group's memory. Digital photos can also be taken and sent to the group participants to remind them of the discussion."

Though graphic recording has been in use since the 1970s, it has become more popular in recent years, perhaps as society has become more accustomed to visual input like the internet. Be-

cause many people remember a drawing or an image better than they remember a message that they hear, graphic recording may increase the impact of a group's work, or a meeting or training.

Among the skills that effective graphic recorders should have are the ability to draw quickly and the ability to listen actively. They must be able draw quickly (but not necessarily perfectly) so that they don't miss important parts of the discussion. Most graphic recorders have standard images that they use in many of their recordings to help them maintain their speed in recording. Strong listening skills help them pull out the important themes from the discussion. As part of active listening, the recorder sorts through what is being said to cluster like ideas and to capture tone and emotion

There are three ways to use graphic recording. In the first, graphic recorders start with a blank sheet and capture the essence of what is being discussed or presented. Another use of graphic recording is the creation of teaching aids. The basics of the presentation

are pre-drawn on large sheets of paper so that the participants have an opportunity to see where they have been and where they are headed in the training event. The last method uses templates which have a pre-drawn visual component related to the group process. The recorder or facilitator fills the template as work proceeds. The



Jeff Melvin

Carol Vollmer captures a recent meeting with graphic recording.

templates can cover a wide variety of topics including Strengths/ Weaknesses/Opportunities/Threats, Graphic History, Context Maps, or even a Meeting Start Up format to include goals, team roles, agendas, etc.

Ms. Vollmer became interested in graphic recording through her work in VA' s Employee Education System. While working with a group that was planning for the future of Primary Care in the VA, she was exposed to documents that presented information graphically. She found those documents very inviting to read. To advance her skills in graphic recording, Vollmer pursued training with The Grove, a consulting company in California. The training included several sessions on graphic recording and team building.

Roberta Kee, a VISN 6 management and program assistant, and Felix Petteway, a VISN 6 human resources assistant, recalled participating in an administrative planning meeting facilitated by Vollmer. They attested to Vollmer's graphic recording's team building success.

"The graphic designs that Ms. Vollmer used in our admin planning session portrayed Sharks and Dolphins," Kee said. "This gave us insight into how well we work together as a team. The visual images helped the group to come up

with great ideas to improve and rebuild our team."

Petteway said that he liked having graphic recording used at their meeting because it "gave us a visual of the direction of where we're going. It let us use what was going on rather than just hearing it."



Technology Links Rural Veterans To Specialty Services

WASHINGTON – VA has started pilot tests linking primary care providers with specialists via videoconferencing technology. Specialty Care Access Network-Extension for Community Healthcare Outcomes (SCAN-ECHO) aims to increase access to specialty care services for Veterans in rural and medically under-served areas

"We are committed to providing increased access to highquality health care to Veterans regardless of where they live," said Secretary Eric K. Shinseki. "Through SCAN-ECHO, patients in rural areas with complex medical conditions are now able to receive specialty care treatment from their local VA physician."

SCAN-ECHO is modeled after an outreach program developed by the University of New Mexico Health Sciences Center's Project ECHO. SCAN-ECHO enables specialty care teams in areas such as diabetes, pain management, and Hepatitis C to use videoconferencing equipment to connect with Veterans' local primary care providers and Patient Aligned Care Teams. During a scheduled SCAN-ECHO clinic, the primary care provider presents a patient's case and the specialty care team recommends a treatment plan. In addition to case presentations, formal clinical education is also provided.

This year, the VHA established a collaborative agreement with the Project ECHO program to educate and provide training materials to VHA staff. In addition, Project ECHO staff will be available for consultation as VHA's program continues to expand and new Centers are added.

Eleven VA medical facilities currently serve as SCAN-ECHO Centers: VA Connecticut Healthcare System, West Haven, Conn.; VA Pittsburgh Healthcare System, Penn.; Hunter Holmes McGuire VA Medical Center, Richmond, Va.; Salem VA Medical Center, Salem, Va.; Louis Stokes VA Medical Center, Cleveland, Ohio; VA Ann Arbor Healthcare System, Ann Arbor, Mich.; New Mexico VA Healthcare System, Albuquerque, N.M.; VA Eastern Colorado Healthcare System, Denver, Colo.; Portland VA Medical Center, Portland, Ore.; San Francisco VA Medical Center; and Veterans Integrated Service Network (VISN) 22 (services split between VA Greater Los Angeles Healthcare System and VA San Diego Healthcare System).

These centers are piloting the original model as developed by Project ECHO and adapting it to the VHA. The program is currently being evaluated to assure that Veterans are experiencing



Courtesy Photo

VA's new SCAN-ECHO initiative aims to increase access to specialty care services for Veterans in rural and medically underserved areas through the use of videoconferencing equipment.

improved access to care prior to a system wide expansion.

To date, 35 teams in 14 different specialties have been formed as of May, with 150 sessions held and a total of 690 consults completed.

One of Secretary Shinseki's top three priorities is increasing access to VA care and services for Veterans wherever they live. VA is expanding access in a three-pronged effort that includes facilities, programs and technology.

VA operates one of the nation's largest integrated health care systems in the country. With a health care budget of about \$50 billion, VA expects to provide care to 6.1 million patients during 920,000 hospitalizations and nearly 80 million outpatient visits this year. VA's health care network includes 152 major medical centers and more than 800 community-based outpatient clinics.

Project ECHO is funded in part by the Robert Wood Johnson Foundation, a philanthropic organization dedicated to improving health and health care for Americans.

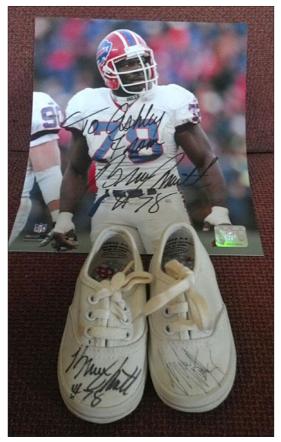


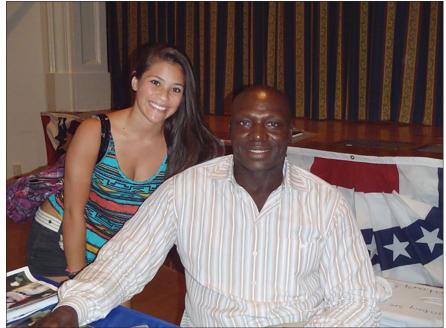


Courtesy Photos

Construction Updates: Progress continues on two of the VISN's newest clinics. At left is an aerial view of the 116,000-square-foot Greenville HCC, which is on track to open in the Fall of 2013. Above, workmen pour concrete at the new Goldsboro CBÖC. The 10,000-square-foot Goldsboro clinic is slated to open in the Spring.

Football Hall of Famer Thrills Salem Community





Glyne Conner

Former NFL great and Virginia Tech alum Bruce Smith visited Salem VAMC recently to speak with about 200 Veterans, staff and volunteers. Salem VAMC volunteer Ashley Conner took advantage of the visit to bring a story full circle. While at Virginia Tech 16 years ago, Smith signed one of her baby shoes when she was just two years old. In a moment she is bound to treasure, Conner, now 18, got the 2009 Hall of Fame inductee to sign the other shoe during his visit.

This Day In Military History:



2 1964 North Vietnamese gunboats attack USS Maddox in the Gulf of Tonkin. On Aug. 7, the U.S. Congress gives President Johnson the power to take whatever actions he sees necessary to defend southeast Asia.











Veteran Retraining Pgm Milestone

WASHINGTON – More than 25,000 unemployed Veterans between the ages of 35 and 60 have already applied for new benefits to cover education costs for up to one year through a joint Department of Veterans Affairs and Department of Labor program that focuses on retraining up to 99,000 Veterans for high-demand jobs.

"This important milestone demonstrates how meaningful this tool will be to help our Nation's unemployed Veterans receive the education and training they need to find rewarding employment in a high-demand career field," said Secretary of Veterans Affairs Eric K. Shinseki. "Veterans realize this is a great opportunity to hone the skills they need to be competitive in the job market, and this program contributes directly to enhancing the strength of our Nation's economy.'

Forty-five thousand Veterans can start receiving benefits during the current fiscal year. VA began accepting applications on May 15. A maximum of 54,000 billets will be available for the fiscal year beginning Oct. 1, 2012.

"No veteran should have to fight for a job at home after fighting to protect our nation," said Secretary of Labor Hilda L. Solis. "This training program focused on high-demand jobs will help unemployed Veterans expand their skills and compete for good jobs that need them."

As part of a provision of the Veterans Opportunity to Work (VOW) to Hire Heroes Act of 2011, the Veteran Retraining Assistance Program (VRAP) allows qualifying Veterans to receive up to 12 months of assistance equal to the full-time Montgomery GI Bill – Active Duty rate, currently \$1,473 per month.

Veterans can apply now on a first-come, first-serve basis for VRAP. Unemployed Veterans should act quickly and apply online to avoid missing this great opportunity. Assistance under this benefit program will end on March 31, 2014.

To complete the application, Veterans need their direct deposit information (bank routing number and account number), the name and location of the school they will attend, the program they wish to pursue, and the high-demand occupation they are working toward.

To qualify Veterans must:

- Be 35-60 years old, unemployed on the day of application, and not dishonorably discharged;
- Start education or training after July 1, 2012, in a VA-approved program of education offered by a community college or technical school leading to an associate degree, non-college degree or a certificate for a high-demand occupation as defined by DOL;
- Not be eligible for any other VA education benefit program, such as Post-9/11 GI Bill, Montgomery GI Bill, or Vocational Rehabilitation and Employment;
- Not be enrolled in a federal or state job-training program within the last 180 days;
- Not receive VA compensation at the 100 percent rate due to individual unemployability.

Upon completion, DOL will contact participants within 30 days after their training to help them find good jobs that use their newly learned skills.

"VA has many partners around the country who are helping us to spread the good news about this unique benefit, which provides our unemployed Veterans with the opportunity to obtain the skills they need to be competitive in the high-demand job market," added Under Secretary for Benefits Allison A. Hickey.

For more information on VOW, VRAP, the definition of "high-demand occupations," and how to apply, visit www. benefits.va.gov/VOW, or call toll free to 800-827-1000. Veterans may also access the VRAP application online at www.ebenefits.va.gov through eBenefits, a joint project of the DoD and VA.

Veterans are also encouraged to visit the nearly 3,000 One-Stop Career Centers across the nation for assistance. To find the center near you visit www.servicelocator.org. For more information about DOL's Veterans programs, go to www.dol.gov/vets/.

TRICARE Prime Enrollment Fee To Increase October 1

FALLS CHURCH, Va. – New TRICARE Prime enrollment fees for uniformed service retirees and their families will begin Oct. 1. Retirees who were enrolled before Oct. 1, 2011 will see a more significant increase since their enrollment fee remained at the 2011 levels of \$230 and \$460 per year when the fees increased last year.

The National Defense Authorization Act for fiscal 2012 allows for the annual increase of TRICARE Prime enrollment fees for most retired beneficiaries based on the annual cost-of-living adjustment. Exceptions to annual increases are for survivors of deceased active-duty sponsors and medically retired service members and their dependents.

Here's how the increase will affect beneficiaries enrolled before Oct. 1, 2011:

• People now pay \$230 per year for individual coverage, and \$460 per year for family coverage. Beginning Oct. 1, individual coverage is \$269.28 per year, and family coverage is \$538.56 per year.

Beneficiaries enrolled on or after Oct. 1, 2011, including all new enrollments:

• People now pay \$260 per year for individual coverage, and \$520 per year for family coverage. Beginning Oct. 1, individual coverage is \$269.28 per year, and family coverage is \$538.56 per year.

All TRICARE Prime enrollees must pay annual enrollment fees, except active-duty service and family members, transitional survivors, and beneficiaries younger than 65 with Medicare Parts A and B.

For more information, go to www.tricare.mil.

New Laws Aid Virginia's Claim As 'Most Veteran Friendly State'

QUANTICO, Va. – Joined by active-duty Marines, Veterans, and members of the General Assembly, Governor Bob McDonnell signed legislation July 27 that furthers Virginia's claim as the "Most Veteran Friendly State in America."

The governor ceremonially signed 22 bills, including: extending the Commonwealth's Veterans hiring preference to active members of the Virginia National Guard looking for state employment; making it easier for overseas military voters to have their ballots delivered and returned more quickly; and, expediting the issuance of business or occupational licenses in Virginia to spouses of military service members.

"Virginia is home to 830,000 Veterans and the largest Navy base in the world. We do not take our strong relationship and history with the military for granted. Instead, it is imperative that we continue to further our goal of making Virginia the 'most Veteran friendly state in America,'" said Governor McDonnell, speaking about the legislation signed that day.

"We must make sure that those who have fought on the frontlines to keep this country safe have the services they need to be productive citizens in the Commonwealth. It is because of their service to this great nation that we live in a safe and prosperous country, and now it is our duty to serve them,"

Delegate Scott Lingamfelter (R-Woodbridge) said, "It is important that we continue to put in place measures that help both active-duty military and their families be successful in the Commonwealth while stationed here. Often it is hard for spouses to find work because they do not have the proper licensing to get a job. We are changing that in Virginia.

"Because of legislation passed this year, spouses will now be able to receive necessary licensing and permits for certain occupations and professions more quickly so they can find a job. This is a commonsense measure that will help our military families truly make the Commonwealth their home while stationed here," Lingamfelter added.

Voluntary Education Safeguards

By Lisa Daniels American Forces Press Service

The Defense Department is nearing completion of an agreement with post-secondary schools to ensure service members have the best possible experience in continuing their education, a senior Pentagon official said July 25.

The department will release later this summer a memorandum of understanding to be signed by colleges, universities and technical schools to make costs, schedules and other particulars transparent to service members, Charles E. Milam, principal deputy assistant secretary of defense for military community and family programs, said. He made the comments at the Department of Defense Worldwide Education Symposium in Las Vegas, held every three years to improve and expand voluntary education for service members and their spouses.

An online draft of the new instruction says all schools providing high school completion and post- secondary education through the DoD Tuition Assistance Program must agree to the multi-agency memorandum of understanding and have a signed copy on file with DOD prior to service members receiving approval of tuition assistance. Each service determines eligibility for tuition assistance, which is capped at \$250 per credit hour, or \$4.500 per year, DOD officials said.

DOD developed the memo with the Departments of Edu-

cation, Veterans Affairs, and Justice, as well as the Consumer Financial Protection Bureau as part of an executive order President Barack Obama announced at Fort Stewart, Ga., in April to ensure that service members, veterans and their families can get the information they need about the schools where they spend their education benefits.

The executive order "will make it easier for military members and veterans to make informed decisions about financial aid and paying for college," Milam said, and "it takes a number of steps to protect our personnel."

Service members enrolled in more than 860,000 graduate and undergraduate courses in fiscal 2011, Milam said, and most of those were online. "Our military community will not always have the 'normal' college experience of living on campus and attending classes but thanks to online courses and other distance learning methods, our service members have been able to pursue educational goals regardless of their location."

As the military draws down in Afghanistan, the department is embarking on a new chapter after 10 years of war. "We are at a point of transition where we are resizing our military, where we face competing budget priorities, and where we are facing a new type of technical warfare." All will require a well-trained, well-educated force, Milam added.

Electronic Records Focus At World AIDS Conference

As the largest provider of HIV care in the U.S., VA was a strong voice at the International AIDS Conference from July 22-27, 2012 in Washington, D.C.

The premier conference brings together professionals in the field of HIV, as well as policy makers, people living with HIV/AIDS, and others committed to ending the pandemic.

VA's special session, "Improving HIV Outcomes using the Electronic Health Record: Case Study: HIV and Aging," focused on how electronic health records, a clinical case registry, and computerized "clinical reminders" to care providers within the health record have improved VA's diagnosis and treatment of Veterans with HIV infection.

VA uses the EHRs to guide HIV management efforts, such as prompting health care providers to offer HIV testing, tracking patients' progress over time, and providing feedback to providers on health outcomes, said Maggie Czarnogorski, M.D., VA's director of clinical public health programs.

"VA's efforts to increase HIV testing in Veterans are paying off. The number of Veterans ever tested in VA has doubled from 2009 to 2011." said Czarnogorski.

Currently, 91 percent of Veterans in VA care who qualify for HIV therapy are receiving medication, and data shows that most Veterans on therapy have undetectable levels of the HIV virus in their blood, which means that Veterans with HIV can live longer, healthier lives.

Since the 1980s, VA has been a pioneer in developing and using EHRs to improve access to care and to boost health outcomes for Veterans. Two out of three new HIV diagnoses in VA are Veterans over age 50, giving VA valuable experience with the issue of HIV and aging.

The International AIDS Conference is an opportunity to assess where we are in the fight against HIV/AIDS, evaluate recent scientific developments and lessons learned, and collectively chart a course forward

VA's participation in the conference share best practices in treating the disease and offer opportunities for dialogue on care issues in the global response to HIV.

For more information on the conference go to www. aids2012.org.

NC Gov OKs Vet Friendly Jobs Bill

RALEIGH, N.C. – Gov. Bev Perdue signed a bill July 24 to make it easier for military spouses to get jobs, and for former military personnel to work there.

The new law would help military families in two ways.

Military spouses whose jobs require a professional license won't have to obtain a North Carolina license if they already have a license with equivalent or tougher standards from another state.

Former military personnel who received training in a field that requires a professional license in the civilian workforce could use their military certifications to obtain a state license if the military standards are equivalent or greater than the

state's standards.

North Carolina requires licensing in dozens of professional specialties, such as social work, massage therapy, locksmithing and electrical contracting. Several professions, including medicine and law, are exempt from the bill; those professionals would need to obtain a North Carolina license.

Fort Bragg spokesman Tom McCollum also hopes the bill is helpful.

"Spouses of our soldiers find it hard to locate quality high-paying jobs. Assistance provided by this bill hopefully will help ease their employment needs and allow potential employers to take advantage of their skills and qualities," he said in a written statement.





Operation North State's Second Annual NCCARES Charity Auction!!

Proceeds Benefit Operation North State's 2012 Christmas Gift Box Initiative, Which Includes Shipping 1500 Gift Boxes Filled with North Carolina Goodies, Products and Messages to NC's Deployed Troops!

Location: Sports Page Food & Spirits
128 D Argus Lane

128 D Argus Lane Mooresville, NC 28117 When: Saturday, August 4, 2012 12:00 pm – Until (Rain or Shine)



VISN 6 Sites of Care

Albemarle POC 1845 W City Drive Elizabeth City, NC

252-331-2191

Asheville VAMC 1100 Tunnel Road Asheville, NC 28805 828-298-7911, 800-932-6408

www.asheville.va.gov/

Beckley VAMC 200 Veterans Avenue Beckley, WV 25801 304-255-2121, 877-902-5142 www.beckley.va.gov/

Beckley Vet Center 1000 Johnstown Road Beckley, WV 25801 304-252-8220

Brunswick Outreach Clinic 20 Medical Campus Drive Supply, NC 28462 910-754-6141

Charlotte Vet Center 2114 Ben Craig Dr. Charlotte, NC 28262 704-549-8025

Charlotte CBOC 8601 University East Drive Charlotte, NC 28213

Charlottesville CBOC 650 Peter Jefferson Pkwy Charlottesville, VA 22911 434-293-3890

Danville CBOC 705 Piney Forest Rd. Danville, VA 24540 434-710-4210

Durham VAMC 508 Fulton St. Durham, NC 27705 919-286-0411, 888-878-6890 www.durham.va.gov/

Emporia CBOC 1746 East Atlantic Street Emporia, VA 23847 434-348-1500 Fayetteville VAMC 2300 Ramsey St. Fayetteville, NC 28301 910-488-2120, 800-771-6106 www.fayettevillenc.va.gov

Fayetteville Vet Center 4140 Ramsey St. Fayetteville, NC 28311 910-488-6252

Franklin CBOC 647 Wayah St. Franklin, NC 28734-3390 828-369-1781

Fredricksburg CBOC 130 Executive Center Pkwy Fredericksburg, VA 22401 540-370-4468

Greensboro Vet Center 2009 S. Elm-Eugene St. Greensboro, NC 27406 336-333-5366

Greenbrier County CBOC 804 Industrial Park Rd. Maxwelton, WV 24957 304-497-3900

Greenville CBOC 800 Moye Blvd. Greenville, NC 27858 252-830-2149

Greenville Vet Center 1021 W.H. Smith Blvd. Greenville, NC 27834 252-355-7920

Hamlet CBOC 100 Jefferson Street Hamlet, NC 28345 910-582-3536

Hampton VAMC 100 Emancipation Dr. Hampton, VA 23667 757-722-9961, 866-544-9961 www.hampton.va.gov/

Hickory CBOC 2440 Century Place, SE Hickory, NC 28602 828-431-5600

Hillandale Rd. Annex 1824 Hillandale Road Durham, North Carolina 27705 919-383-6107 **Jacksonville CBOC** 241 Freedom Way Midway Park, NC 28544 910-353-6406, 910-353-6406

Jacksonville, N.C. Vet Center 110-A Branchwood Driv Jacksonville, NC 28546 910-577-1100

Lynchburg CBOC 1600 Lakeside Drive Lynchburg, VA 24501 434-316-5000

Morehead City CBOC 5420 U.S. 70 Morehead City, NC 28557 252-240-2349

Norfolk Vet Center 1711 Church Street Norfolk, VA 23504 757-623-7584

Princeton Vet Center 905 Mercer Street Princeton, WV 24740 304-425-5653

Raleigh CBOC 3305 Sungate Blvd. Raleigh, NC 27610 919-212-0129

Raleigh II Annex 3040 Hammond Business Place Raleigh, NC 27603 919-899-6259

Raleigh Vet Center 1649 Old Louisburg Rd. Raleigh, NC 27604 919-856-4616

Richmond VAMC 1201 Broad Rock Blvd. Richmond, VA 23249 804-675-5000, 800-784-8381 www.richmond.va.gov/

Roanoke Vet Center 350 Albemarle Ave., SW Roanoke, VA 24016 540-342-9726

Robeson County CBOC 139 Three Hunts Drive Pembroke, NC 28372 910-521-8452 Rutherford County CBOC 374 Charlotte Rd. Rutherfordton, NC 28139 828-288-2780

Salem VAMC 1970 Roanoke Blvd. Salem, VA 24153 540-982-2463, 888-982-2463 www.salem.va.gov/

Salisbury VAMC 1601 Brenner Ave. Salisbury, NC 28144 704-638-9000, 800-469-8262 www.salisbury.va.gov/

Staunton CBOC 102 Business Way Staunton, VA 24401 540-886-5777

Tazewell CBOC 123 Ben Bolt Ave. Tazewell, VA 24651 276-988-2526

Virginia Beach CBOC 244 Clearfield Avenue Virginia Beach, VA 757-722-9961, ext. 1900

Virginia Beach Vet Center 324 Southport Circle, Suite 102 Virginia Beach, VA, 23452 757-248-3665

Wilmington CBOC 736 Medical Center Drive Wilmington, NC 28401 910-763-5979

Winston-Salem CBOC 190 Kimel Park Drive Winston-Salem, NC 27103 336-768-3296

Winston-Salem Annex 2101 Peters Creek Parkway Winston-Salem, NC 27127 336-761-5300

Wytheville CBOC 165 Peppers Ferry Rd. Wytheville, VA 24382-2363 276-223-5400